

## GUILT: ELABORATION OF A MULTIDIMENSIONAL MODEL

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This article expands on a model that conceptualizes guilt as a multidimensional construct with affective and cognitive dimensions. In the model, guilt magnitude is a function of the magnitudes of five variables posited as primary components of guilt: distress and four interrelated beliefs about one's role in a negative event. Originally proposed to account for guilt that emerges in the context of traumatically stressful events, the model may also help account for guilt that occurs in response to common-guilt evoking events. Eight contextual variables that promote distress and activate guilt cognitions are identified, drawing attention to social or situational factors that contribute to guilt. The contextual variables are used to explain why trauma-related guilt is common and usually more chronic and severe than commonplace guilt. Initial evidence for the model is summarized and directions for future research discussed.

Although guilt is a common emotional experience, the construct of guilt has until recently received relatively limited attention from researchers in abnormal and personality-social psychology (Baumeister, Stillwell, & Heatherton, 1994; Tangney & Fischer, 1995). Moreover, theoretical discussions about guilt are notably brief or absent in most psychology textbooks (e.g., Carlson & Hatfield, 1992; Davison & Neale, 1998; Mischel, 1986; Myers, 1996). Although there is no consensus about what factors are necessary and sufficient causes or determinants of guilt (e.g., Baumeister et al., 1994; Buss & Durkee, 1957; Mosher, 1968; Weiner, Graham, & Chandler, 1982), there has been little effort to test competing conceptualizations of guilt. Furthermore, only a few studies have manipulated variables thought to account for differences in the intensity with which guilt will be experienced (e.g., McGraw, 1987). Some

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research has examined personality variables that affect tendencies or proneness to experience guilt (see Baumeister et al., 1994), but there has been no investigation of factors that make some *events* more strongly guilt-evoking than others. For example, most guilt research has concentrated on individual differences in guilt proneness (e.g., Kugler & Jones, 1992; Tangney, 1990) rather than on situational or contextual factors that influence the occurrence and strength of guilt.

An additional impediment to a thorough understanding of guilt is the lack of a clear understanding or agreement about the nature of the relationship between so called "pathological" or chronic guilt and mild transitory guilt that is a common occurrence in many people's lives (e.g., Harder, 1995; Tangney, Burggraf, & Wagner, 1995). In addition, the importance of guilt as a distinctive emotional experience has been challenged by evidence suggesting that individual differences in the disposition to experience negative moods are more important than individual differences in the disposition to experience guilt or other specific negative affective experiences (e.g., Watson & Clark, 1984; Zahn-Waxler & Robinson, 1995; see Clark & Watson, 1995, p. 312).

The purpose of this article is to expand and elaborate upon a recently proposed multidimensional model of guilt (Kubany, Abueg, et al., 1995; Kubany & Manke, 1995). The model specifies numerous intrapersonal and contextual variables thought to contribute to the occurrence and magnitude of guilt. The initial presentations of the model attempted to account for individual differences in guilt that emerge in the context of traumatic life events, such as combat and physical or sexual abuse. The expanded model is more complex, and although the major emphasis is still on guilt that has its genesis in trauma, the model may also account for guilt that occurs in the context of ordinary or commonplace life events.

### Overview

This article presents a model that specifies numerous factors that contribute to the occurrence and magnitude of guilt. In presenting this model, we will (a) define guilt, (b) discuss the heuristic value of studying guilt among trauma survivors, (c) delineate key features of a multidimensional model of guilt and briefly describe initial evidence to support it, (d) present a causal model of guilt, (e) briefly discuss specific thinking errors that can contribute to irrational guilt, (f) discuss methods for reducing and avoiding guilt, and (g) suggest possible future investigations for testing the validity of various facets of the multidimensional model.

### The Meaning of Guilt

Most authorities agree that guilt possesses both affective and evaluative or interpretative components (e.g., Kugler & Jones, 1992; Roseman, Weist, & Shwartz, 1994). This view is consistent with theories

that conceptualize negative emotions in terms of diffuse or undifferentiated negative affect plus an interpretation of the context in which the affect occurs (Staats, 1975, 1996; see Ellsworth, 1994; cf., Schachter, 1964). From this perspective, negative emotions can be differentiated on the basis of the types of appraisals that are assigned to or attached to negative affect in specific situational contexts. Kubany and colleagues (e.g., Kubany, Abueg, et al., 1995) proposed that guilt consists of an emotional component and a set of interrelated beliefs about one's role in a negative event. Guilt is defined *phenomenologically* as an *unpleasant feeling with accompanying beliefs that one should have thought, felt, or acted differently* (with implications of responsibility, wrongdoing, and/or insufficient justification).<sup>1</sup> This definition, which is consistent with definitions provided by other authors (e.g., Foa, Steketee, & Rothbaum, 1989; Gerrard & Hyer, 1994; Matsakis, 1999),<sup>2</sup> has guided our guilt assessment research (e.g., Kubany et al., 1996), our guilt therapy development (e.g., Kubany, 1997a, 1997b, 1998; Kubany & Manke, 1995; Kubany & Watson, 2002) and our theoretical study of guilt (Kubany, Abueg, et al., 1995; Kubany, Watson, Leisen, & Kaplan, 2001). Empirical support for the definition comes from various sources—including the authors' clinical experience (e.g., Kubany, 1994; Kubany, Hill, & Owens, in press; Kubany & Watson, 2002), the work of other clinicians and researchers who have described client and participant accounts of guilt (e.g., Burns, 1980; Lindsay-Hartz, de Rivera, & Mascolo, 1995; Resick & Schnicke, 1993), analyses of structured interviews probing the phenomenology of trauma-related guilt (Kubany et al., 1996), and an analogue study investigating the phenomenology of trauma-related guilt (Kubany, Watson et al., 2002).

### The Study of Guilt in the Context of Traumatically Stressful Life Events

The study of guilt in the context of traumatically stressful events,<sup>3</sup>

<sup>1</sup>Guilt may be directly contrasted with anger, which can be defined as an unpleasant feeling accompanied by a belief that *someone else* should have thought, felt, or acted differently (see Weiner, 1990; Weiner, Graham, & Chandler, 1982). Guilt involves appraisals or attributions about self, whereas anger involves attributions about others (Ellsworth, 1994; Weiner et al., 1982).

<sup>2</sup>For example, Gerrard and Hyer (1994) defined guilt as "a painful affect, often accompanied by thoughts of self-blame, which occur after a violation in reality or fantasy of a schema regarding how one should behave (or think or feel)" (p. 250). Foa et al. (1989) defined guilt in the context of trauma "as a failure to exert perceived control in the situation to prevent the catastrophe from occurring" (p. 164). They illustrate with the example of a rape victim who will experience guilt if she "concludes that she did not effectively exercise those behaviors that were under her control, e.g., 'I should have run the other way'" (p. 164).

<sup>3</sup>According to the Diagnostic Statistical Manual-Version IV (DSM-IV; American Psychiatric Association, 1994), two elements must be present for a stressful event to qualify as a *traumatic* stressor. Criterion A1 stipulates that "the person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others" (p. 428). Criterion A2 stipulates that the person's subjective response to the A1 event must involve "intense fear, helplessness, or horror." By definition, then, traumatic stressors are more stressful than every day stressors (e.g., hurting someone's feelings, disappointing a loved one, social rejection by a friend, a minor injury, or even getting a divorce or getting fired). In this article, the terms *trauma*, *traumatic events*, and *traumatic stressors* are used interchangeably.

such as unexpected death of a loved one and physical or sexual abuse, may furnish an important perspective from which to better understand guilt across all contexts. First, there are many rich opportunities to study guilt in the context of trauma. Guilt and self-blame have been identified as common sequelae of many different kinds of potentially traumatic events, including childhood sexual abuse (e.g., Spaccarelli, 1994), rape (e.g., Janoff-Bulman, 1979; Resick & Schnicke, 1993), spouse abuse (e.g., Cascardi & O'Leary, 1992), serious accidents and burns (e.g., Bulman & Wortman, 1977; Kiecolt-Glaser & Williams, 1987), combat (e.g., Kubany, 1994), technological disasters (e.g., Joseph, Hodgkinson, Yule, & Williams, 1993), and the sudden unexpected death of loved ones (e.g., Gerber & Resick, 1992, November; McNeil, Hatcher, & Reubin, 1988; Miles & Demi, 1991). For example, in an investigation of guilt among 168 battered women and 74 Vietnam combat veterans, approximately half the women and almost two-thirds of the veterans experienced at least moderate guilt related to their respective traumas (Kubany et al., 1996). In a study of 269 physically and/or sexually abused women, 2/3 (67%) reported moderate or greater abuse-related guilt, and 1/3 (34%) reported considerable or greater guilt related to their own victimization (Kubany, Owens, Leisen, Kaplan, & Ramelli, 2001). Second, individuals exposed to similar traumatic events (e.g., rape) or even the *same* event (e.g., a technological disaster) experience disparate levels of guilt; thus, examination of guilt among specific groups of trauma survivors may facilitate the systematic study of factors that account for variations in guilt and guilt magnitude. Third, much of what we know about guilt causation is based on analogue research (e.g., McGraw, 1987). The study of guilt in the context of problematic life events has ecological validity that is often missing in laboratory studies of guilt (e.g., Brockner, Davy, & Carter, 1985; McGraw, 1987). Fourth, the fact that trauma-related guilt is often observed among *innocent* witnesses and victims (e.g., Jehu, 1989) suggests that extrapersonal or contextual variables may be important determinants of guilt. Investigation of situational and social contexts that promote guilt among innocent trauma survivors may broaden our understanding of variables that contribute to guilt in response to everyday events (Baumeister et al., 1994; Kubany, Watson, et al., 2002; Kubany & Manke, 1995). In fact, a significant portion of this article is devoted to the delineation of contextual factors that may contribute to the occurrence and magnitude of both trauma guilt and commonplace guilt. Finally, traumatically stressful events may be an excellent context in which to study the relationship between guilt and shame, an emotion whose relationship with guilt is incompletely understood and a source of controversy (e.g., Wallbott & Scherer, 1995; see especially, Harder, 1995, pp. 381-382). As with guilt, shame is a common emotional experience among trauma survivors (e.g., Dutton, 1992; Hogland & Nicholas, 1995; Stone, 1992; Talbot, 1996; Wong & Cook, 1992), and investigations of the relationship between guilt and shame in trauma may advance a scientific understanding of guilt.

### A Multidimensional Model of Guilt

The formulation of guilt delineated and expanded upon in this article is characterized as multidimensional because guilt is conceptualized as a multicomponent construct. The magnitude of guilt a person will experience after exposure to a negative event is posited to be a function of the presence and magnitude of a combination of five factors hypothesized to be primary components or determinants of guilt. These factors include distress (about a negative outcome) and four interrelated beliefs about one's role in the event (henceforth referred to as guilt cognitions): (a) perceived responsibility for causing a negative outcome, (b) perceived insufficient justification for actions taken, (c) perceived violation of values, and (d) beliefs about foreseeability and preventability—the degree to which a person thinks he or she knew (in advance) that a negative outcome was going to occur and could have prevented its occurrence.<sup>4</sup> These variables were identified on the basis of clinical work with trauma survivors, reviews of the clinical and research literature on guilt, and analyses of structured interviews probing the phenomenology of trauma-related guilt (Kubany, 1994; Kubany, Abueg, et al., 1995; Kubany et al., 1996; Kubany & Manke, 1995).

Notions of wrongdoing and responsibility for causing harm have been identified as critical features or determinants of guilt by many investigators (see Kubany, Abueg, et al., 1995, for a brief review). Also, a few investigators have identified justification or lack of justification (for acting as one did) as a moderator of guilt (Kubany, Abueg, et al., 1995). However, beliefs about preoutcome knowledge related to outcome foreseeability and preventability have only been identified recently as an important determinant of guilt (Kubany, 1994).

#### *Beliefs about Foreseeability and Preventability and Hindsight-Bias*

Beliefs that one possessed preoutcome or foresight knowledge that would have made it possible to prevent a negative event play a central role in the multidimensional model of guilt. Our initial theorizing about the role of perceived outcome preventability as a determinant of guilt was done in the context of discussions about hindsight bias (Fischhoff, 1975; Hawkins & Hastie, 1990). Hindsight bias occurs when individuals allow outcome knowledge to bias their recollections of what they thought was going to happen before the outcome was known. Researchers in several studies have found that when participants are given information about event outcomes, the participants are more likely to claim they would have predicted the outcomes than are participants who do not get outcome information. In addition, people are typically unaware that outcome

<sup>4</sup>In the initial exposition of the multidimensional model of guilt (Kubany, Abueg, et al., 1995), perceived occurrence of a negative event or outcome was specified as a sixth guilt component. In the revised and expanded model, the occurrence of a negative outcome (i.e., damage or harm) is considered to be a contextual variable that contributes to guilt rather than as a phenomenological component of guilt.

knowledge biased their judgments (Fischhoff, 1975; Hawkins & Hastie, 1990). The meaning of hindsight-biased thinking, as it applies to guilt, carries implications of a failed obligation to prevent harm. If a person believes falsely that he or she "knew all along" or disregarded evidence that a negative event (in which he or she was involved) was going to occur, it follows that the person will also believe that he or she *could have* and *should have* acted on that knowledge to prevent the negative outcome. In other words, perceived knowledge of foreseeability and preventability (with respect to a looming negative event) dictated a moral obligation to take preventative action. In his classic initial investigation of hindsight bias, Fischhoff (1975) alluded to the relationship between hindsight-biased beliefs and guilt. He said that, if in retrospect, a negative outcome appears to have seemed relatively likely,

the (decision maker) can do little more than berate himself for not taking the action which his knowledge seems to have dictated. He might be said to add the insult of regret to the injury inflicted by the event itself. (Fischhoff, 1975, p. 298)

Hindsight-biased thinking is reflected in phrases such as, "I should have . . . I could have . . . It was preventable . . . I ignored the (warning) signs." For example, the following statements suggestive of hindsight-biased thinking were made by rape victims who blamed themselves for getting raped: "I should have run the other way" (Foa et al., 1989, p. 164) . . . "I went with him voluntarily. I should have known better . . . I should have been able to stop the rape" (Resick & Schnicke, 1993, p. 69 and p. 82).

Hypothesizing reasons why hindsight bias occurs, Fischhoff (1975) quoted the historian, Florovsky, as saying,

In retrospect, we seem to perceive the logic of the events which unfold themselves in a regular or linear fashion according to a recognizable pattern with an alleged inner necessity. So that we get the impression that it really could not have happened otherwise. (p. 369)

Similarly, Fischhoff quoted Wolhstetter (1962) as saying,

It is much easier after the event to sort the relevant from the irrelevant signals. After the event, of course a signal is always crystal clear. We can now see what disaster it was signaling since the disaster has occurred, but before the event it is obscure and pregnant with conflicting meaning. (p. 298)

Kubany (1994) suggested that hindsight bias may be a major determinant of trauma-related guilt among combat veterans. He observed that many combat veterans believe today that some negative wartime events could have been anticipated and that they exerted poor judgment by overlooking or disregarding important clues or warning signs. Kubany

suggested that many veterans feel guilty "because of the faulty assumption that they could have, and therefore should have, known better" (p. 6). Kubany and Manke (1995) suggested that hindsight bias may be one of the mechanisms that underlie the frequent observation that trauma survivors tend to exaggerate the importance of their roles in trauma (e.g., Jehu, 1989; Miller & Porter, 1983; Price, 1990). Consistent with this hypothesis, Kubany, Watson, et al. (2002) found in two analogue experiments that giving participants information about how they might have prevented several (hypothetical) tragic events (had they possessed that knowledge prior to the outcomes) produced highly significant increases in ratings of distress and guilt.<sup>5</sup>

Referring to hindsight-biased thinking as "second guessing" and "Monday morning quarter-backing," Walster (1967) suggested that hindsight bias may play a more important role in guilt that is trauma-related than in guilt that is associated with everyday stressors. When event outcomes are extremely bad, people may be more likely to dwell on, rehash, or repeatedly play over in their minds what happened and how things could have turned out differently. As a result, event outcomes may "seem more predictable than if one had not thought it through so completely" (Walster, 1969, p. 239; cf. Frazier & Schauben, 1994). Hindsight-biased thinking is, in fact, very common among trauma survivors (e.g., Kubany, 1994, 1997a; Kubany & Manke, 1995; Kubany & Watson, 2002). Moreover, hindsight bias may contribute to the high prevalence of guilt among trauma survivors. As indirect evidence for this hypothesis, in three factor-analytic studies of a recently validated Trauma-Related Guilt Inventory, three hindsight bias items (e.g., "I should have known better") loaded on the same factor as responsibility/blame items (e.g., "I was responsible for causing what happened") (Kubany et al., 1996).

### *Understanding Guilt in Terms of the Magnitudes of its Constituent Parts*

According to the multidimensional model, the contribution of each of the five constituent guilt components (as a determinant of guilt magnitude) depends importantly on component *magnitude*. That is, to successfully predict guilt magnitude, it is considered necessary to know the strength of each guilt component—as opposed to knowing merely whether a component is present or absent. For example, if the magnitude of other guilt components are held constant, the magnitude of guilt is expected to be a direct linear function of the magnitude of responsibility (McGraw, 1987). Similar reasoning can be applied to other hypothesized

<sup>5</sup>Preventability beliefs do not have to be distorted or biased to function as a potential contributor to guilt. When people intentionally lie, cheat, steal, or deceive, they *can* foresee that their contemplated actions may harm or upset someone, and they *are* capable of preventing negative outcomes. If they regret these actions, they will presumably experience guilt. Similarly, words spoken in anger may be intentionally directed at causing distress or emotional pain, and guilt may later emerge if the aggressor starts to "feel sorry" for the target and thinks he or she "should not have" spoken hurtful words. This observation is consistent with Ellsworth's (1994) observation that emotions may develop in time because the component appraisal of an emotional experience need not be simultaneous with the event's occurrence.

components of guilt. For example, individuals who are extremely distressed by a negative event would be expected to experience more guilt than individuals who play a similar role in the event but who are only mildly distressed.

*Necessary and Sufficient Conditions for Guilt*

According to the multidimensional model, both negative affect and guilt-related cognitions must be present for guilt to occur. If recollection of an event evokes no negative affect whatsoever, guilt will not occur no matter how one interprets his or her role in the event. For example, a person will not be expected to experience guilt for his or her role in a heinous crime (e.g., child molestation) if the person is not distressed by the memory of what happened—even if the person acknowledges that he or she caused the event and believes that he or she violated basic human values (see Chaplin, Rice, & Harris, 1995; Lisak & Ivan, 1995; Marshall, Hudson, Jones, & Fernandez, 1995). Similarly, guilt will not be expected to occur if a person does not implicate himself or herself in a negative event in any way—no matter what level of distress or grief is evoked by the event. A person who is distressed by a negative event, such as a car accident or an earthquake, will not be expected to experience guilt if he or she (a) disavows any responsibility for causing the result, (b) believes that he or she did not violate personal values, (c) believes that his or her actions were fully justified, *and* (emphasis added) (d) believes the event was unforeseeable (i.e., believes there is no possible way he or she “could have” foreseen or predicted, hence prevented, the outcome). If the person does not hold guilt-related beliefs, he or she may still experience emotion or distress, but the emotion will not be experienced as guilt. According to Ellsworth (1994),

negative events seen as caused by other people evoke anger; negative events seen as caused by oneself evoke guilt (or regret if no one else is hurt); negative events seen as caused by fate, or chance, or circumstances beyond anyone's control evoke sorrow (see also Frijda, 1986; Ortony et al., 1988; Roseman, 1984; Scherer, 1984) (p. 33).

According to the multidimensional model, guilt will be maximal when all of the hypothesized guilt components are present to an extreme degree. Following a negative event, guilt will be maximal when (a) event-related distress is profound, (b) the person believes he or she knew with certainty what was going to happen before it happened and that the outcome was preventable, (c) the person believes he or she was 100% responsible for causing the outcome, (d) the person considers his or her actions completely unjustified, and (e) the person considers himself or herself to have violated central personal values or mores.



### The Relationship between Trauma-Related Guilt and Commonplace or "Everyday" Guilt

According to the multidimensional model, guilt experienced in the context of stressful events of everyday life may be explained in terms of the same variables that account for guilt that emerges in the context of trauma. Trauma guilt may be distinguishable from (and tends to be greater than) guilt evoked by common guilt-evoking events (e.g., disappointing a loved one, hurting someone's feelings, forgetting a commitment) primarily because (a) traumatic or tragic events cause more distress than guilt-evoking events of everyday life (Kubany, Watson, et al., 2002) and (b) traumatic outcomes (e.g., unexpected, sudden death) are often irreversible or irreparable. First, as a component of guilt, distress is expected to contribute to guilt as a direct function of its magnitude, and traumatic events are more distressing than are everyday stressors (American Psychiatric Association, 1994). Second, (as will be discussed), guilt-instigated impulses to make restitution are thwarted when event outcomes are irreparable, thereby exacerbating guilt and contributing to guilt chronicity. The relationship between trauma guilt and commonplace guilt may be further clarified by delineating several contextual variables that contribute to guilt.

#### Contextual Variables that Contribute to Guilt and Guilt Magnitude

The multidimensional model suggests several situational and social circumstances—having nothing to do with the values, character, or guilt proneness of the individuals involved—that may affect the occurrence and magnitude of guilt. As discussed earlier, the two conditions considered necessary for producing guilt are (a) unpleasant feelings associated with a negative outcome, and (b) cognitions that one played a role in the outcome. Thus, any situational or social circumstance that (a) produces or evokes distress and/or (b) heightens the likelihood that a person will perceive himself or herself as playing a role in a negative event is expected to heighten the probability of guilt. We have identified eight such factors: (a) infliction of damage or harm, (b) close proximity to or direct involvement in a negative event, (c) harm caused to a close relationship partner, (d) involvement in events that cause irreparable harm, (e) human-caused negative events (versus acts of God), (f) situations in which *all* available courses of action have negative consequences, (g) negative events which produce outcomes that are arbitrary or unfair, and (h) blame from others.

#### *Infliction of Damage or Harm*

Events which cause damage or harm set the stage for guilt because such events are sources of distress, which is a component of guilt. It is presumed that the level of stress and distress associated with a negative event will be highly correlated with the amount of damage or harm caused

by the event (see American Psychiatric Association, 1994, pp. 427-428). As extreme examples, complete destruction of one's entire home from an earthquake is expected to evoke greater distress than minor water damage, and theft of one's entire life savings is expected to cause greater distress than theft of a few dollars. As a general proposition, the occurrence and magnitude of guilt is expected to increase as a direct function of the degree of damage or harm inflicted—because distress tends to increase as damage increases. This proposition may seem so obvious or self-evident as to be trivial. However, it underscores the potential importance of looking outside the individual for factors that contribute to guilt.

#### *Physical Proximity to or Direct Involvement in a Negative Event*

A second contextual factor expected to contribute importantly to guilt is close proximity to the occurrence of damage or harm. If a person witnesses a negative event, is nearby, or is involved in some other way (e.g., recently interacted with a victim; is a close relationship partner with a victim), the probability of guilt is expected to increase. When a person is in close proximity to someone who has been hurt, both the affective and cognitive elements necessary for the occurrence of guilt are likely to be activated. First, individuals who witness someone experiencing misfortune will often experience empathetic distress about the plight of the injured party (Baumeister et al., 1994). Second, with close proximity there may be an increased probability that witnesses will perceive themselves as having played a role in the outcome (e.g., believe in hindsight that they could have prevented the outcome from occurring). A Vietnam combat veteran reported that he felt "detached" (and no guilt) when killing enemy on the ground from his helicopter "because of the great distances involved" (Kubany, 1997b). However, subsequent witnessing of the carnage on the ground from close range activated intense distress, attitudes of self-condemnation, and severe guilt. Thus, close proximity is expected to increase the probability of guilt because proximity may activate the two necessary and sufficient conditions for guilt specified by the multidimensional model—namely, distress and cognitions that one played a role in a negative outcome.

#### *Harm Caused to a Close Relationship Partner*

According to Baumeister et al. (1994), guilt is most likely to occur in the context of close relationships because empathetic responding is strongest in close relationships where there is communal concern for another person's welfare. As a variable whose magnitude affects the magnitude of guilt, distress would be expected to be much greater if a close relationship partner experiences misfortune than if the same fate befalls an acquaintance or stranger. Moreover, when something extremely bad or tragic happens to a loved one (such as permanent injury or death), personal feelings of loss, sorrow, or grief can be profound (e.g., Fish, 1986; Thompson, Norris, & Ruback, 1998). In addition, people often

hold themselves accountable for the well-being of close relationship partners because of a role assignment (e.g., as mother, older brother, platoon leader) and may hold themselves responsible for negative outcomes that befall the relationship partner (Kubany & Manke, 1995; e.g., De Frain, Jakub, & Mendoza, 1992; Miles & Demi, 1986). Hence, harm caused to a close relationship partner is a contextual factor expected to increase the likelihood and magnitude of guilt.

*Involvement in Events that Cause Irreparable Harm or Damage*

We postulated that involvement in negative events (by virtue of proximity or a close relationship with a victim) heightens the likelihood of guilt. It is further postulated that, compared to involvement in events which produce reparable harm, involvement in events which cause irreparable or irreversible harm will evoke guilt that is stronger and more chronic. The occurrence of guilt stimulates impulses to make amends or restitution, and taking corrective action is an important mechanism for relieving or getting rid of guilt (e.g., Ellsworth, 1994; Frijda & Mesquita, 1994; Tangney, Wagner, & Gramzow, 1992). This avenue for relieving guilt does not exist when damage is irreversible, and the tension and remorse associated with guilt may be exacerbated "when reparation is blocked in some way" (Tangney et al., 1992, p. 469). Thus, an important reason why trauma guilt tends to be more severe than guilt that is not trauma-related is that traumatic events are far more likely than negative events of everyday life to produce outcomes considered irreparable or unfixable (Kubany & Manke, 1995; Kubany et al., 1996). For example, a "rape victim who valued virginity can't go back to being a virgin, and someone who didn't deserve to die cannot be brought back to life" (Kubany & Manke, 1995, p. 32). As another example, many Vietnam veterans are severely guilt-ridden over irreversible wartime traumas that happened more than 20 years ago (Kubany et al., 1996; Kubany, Abueg, Kilauano, Manke, & Kaplan, 1997).

*Involvement in unexpected events that cause irreparable or irreversible harm or damage.* Guilt associated with irreparable negative events that occur suddenly and unexpectedly may tend to be greater than guilt associated with irreparable negative events that had been forecast, anticipated, or predicted. For example, death of a loved one due to a lingering or progressive disease or old age might be expected to evoke less guilt than would sudden death of a loved one due to homicide, suicide, accident, or unexpected illness (cf., Lehman, Wortman, & Williams, 1987). When a loved one is dying from natural causes in old age, family members can do much to prepare for (and try to prevent) the death and have ample opportunity to "make up" or settle the score on unresolved issues from the past. Knowing that a parent is nearing death, an adult child may forgive or apologize to the parent, otherwise resolve unsettled issues or serious differences from the past, or provide special comfort or nurturance to the parent. By contrast, if a loved one dies suddenly and unexpectedly, old issues waiting to be settled or resolved become instantly irresolvable.

In addition, when a loved one dies unexpectedly, hindsight bias may play a greater role in contributing to guilt than under circumstances where death had been anticipated or predicted. Surviving family members may believe that "somehow" they "should have" anticipated the outcome and prevented it (see example from Lindsay-Hartz et al., 1995, pp. 21-22). They may believe (in hindsight) that they missed signs, signals, or clues that the negative outcome was going to occur and think they should have acted on these signs to avoid or prevent the loved one's death (e.g., Beck, Rush, Shaw, & Emory, 1979, p. 177; Kubany & Manke, 1995; Lindsey-Hartz et al., 1995). In a study of 80 grandmothers and grandfathers of infants who died from Sudden Infant Death Syndrome (SIDS), 29% of participants blamed themselves for the baby's death, and many of their statements suggested that hindsight-biased thinking was a prominent factor (e.g., "I am a cigarette smoker, and I felt that I could have been to blame . . . I should have been able to detect a problem . . . I wondered if I could have prevented it . . . I felt guilt because of the impersonal rearing of my children" (De Frain et al., 1992, p. 171).

#### *Human-Caused Negative Events Versus "Acts of God"*

It is human nature to search for meaning in negative events or to understand "why" such events occurred (e.g., Ellsworth, 1994; Harvey, Hunt, & Schroder, 1961; Jones et al., 1972; see Resick & Schnicke, 1993). If a person's explanation is "because of something I did or failed to do," one of the two necessary conditions for the occurrence of guilt (perceived role in a negative event) is activated. Negative events which are considered to be acts of God or outside of human control (e.g., earthquakes, tornadoes) are less likely to activate internal attributions (such as personal responsibility or preventability beliefs) than are negative events attributable to or caused by people (e.g., interpersonal violence, technological disasters). As an example from daily living, a father who promised to take his son to a baseball game might be expected to experience less guilt if the game was "rained out" than if he "had to work" on the day of the game. The greater degree to which a negative event is perceived as caused by "bad luck" or external forces beyond human control, the less likely it is that guilt is expected to occur (see Ellsworth, 1994). This proposition is derivable from the multidimensional model because if human beings are not perceived as playing a role in a negative event, guilt is not expected to occur.

#### *Situations in Which All Available Courses of Action Have Negative Consequences*

Situations in which no good choices are available and all response options are associated with negative outcomes are considered highly likely to evoke guilt. In such situations, no matter what course of action individuals take, something bad or unpleasant happens, and the stage is set for guilt. Because involved individuals intentionally *choose* a course of action with known negative consequences, it is easy to see why they will

perceive themselves as having directly played a role in the outcome. Moreover, the more damage or harm that the "least bad" choice produces, the greater the distress one would expect the "agent" to experience. Kubany and Manke (1995) noted that during many traumatic events individuals are confronted with extremely difficult choices—all of which result in serious harm to self or others and "violation" of some important value. Soldiers in battle are faced with the option of killing the enemy or allowing themselves and comrades to be killed. Victims of sexual assault can fight back and risk injury or not fight back and have to deal with those consequences. Incest victims can choose to disclose the abuse and risk rejection and family break-up, or they can choose to suffer in silence. All of these situations are "lose-lose," "no win," or "Catch 22" in the sense that all available courses of action have some repugnant consequence (Kubany, 1994). A classic illustration of this type of situation was depicted in the movie, *Sophie's Choice*, when the lead character played by Meryl Streep was faced with "choosing" which one of her children would live and which one would die.

According to Kubany and Manke (1995), when individuals encounter Catch 22 situations such as those described above, they are likely to experience guilt because of a perceived "irresolvable moral dilemma" (p. 42); they must *choose* among options which are all unacceptable in some important respect.<sup>6</sup> When individuals are exposed to Catch 22 situations, the occurrence of guilt may be virtually predetermined by the nature of the situation, even though the guilt experienced may have nothing to do with the person's personality, values, or moral integrity.

Catch 22 situations represent examples of double approach-avoidance conflicts (Cofer & Appley, 1964)—conflicts in which all available courses of action have both positive and negative consequences. The "positive" consequences in Catch 22 trauma situations are validation of personal values associated with actions selected. By choosing to kill, a soldier may validate his value as a "patriotic American" (e.g., Kubany, 1997b, p. 236). A rape victim who chooses not to fight back will validate a value which places a premium on her survival. An incest victim who chooses to keep silent may validate childhood values or beliefs that he is supposed to maintain family harmony or stay loyal to the perpetrating relative.

Less extreme examples of double approach-avoidance conflicts

<sup>6</sup>Many battered women face a myriad of bad choices, which may help to explain why abuse-related guilt is extremely common among battered women (e.g., Kubany et al., 1996). Faced with Catch 22-like choices, many battered women will experience guilt no matter what course of action they select. Some battered women experience guilt for calling the police and "betraying" their partner, while others have guilt about not calling the police. Some battered women experience guilt about pressing charges, while others have guilt about not pressing charges (or recanting charges). Some battered women experience guilt about staying with the batterer, while others, who left, have guilt about depriving the children of their father. Some battered women experience guilt about reconciling with the batterer after having left, while others, who are staying away, "feel sorry for" the batterer and experience guilt about not going back.

occur frequently in everyday life. Such conflicts, which are of two general types, may represent common *social* contexts that promote guilt (cf. Baumeister et al., 1994). The first type occurs when individuals are powerless to please everyone they want to please (or avoid displeasing). A mother might be forced to choose between going to her son's basketball game and her daughter's recital, both of which are on the same night. A husband may be asked to take sides in a dispute involving his wife and his mother. An individual may be asked by a close friend to disclose information which another friend would not want disclosed. In the TV series, *Rosanne*, Rosanne's sister, Jackie—who was about to deliver her baby—was asked by the doctor to tell either Rosanne or the father of her baby to leave the delivery room (because of overcrowding). With a look of consternation, Jackie said, "Why do I have to decide!?" In all of these situations, the individuals in conflict will disappoint someone no matter what they decide or choose to do, and guilt is expected to occur.

The second common type of double approach-avoidance conflict occurs when individuals are conflicted about whether to please (or disappoint) oneself or to please (or disappoint) someone else (e.g., a boss, friend, relative, intimate partner) and cannot simultaneously please oneself and the other party. Such guilt may be most likely to occur when individuals are *genuinely in conflict* about whether to satisfy personal desires and disappoint a relationship partner or to sacrifice personal desires and avoid or terminate the partner's displeasure. For example, this type of conflict may commonly occur when individuals contemplate having an extramarital affair or want to terminate a romantic relationship (e.g., Baumeister & Wotman, 1992). Counselors who work with battered women are all too familiar with women who would be much better off if they left an abusive relationship but consider staying (or going back) because they feel guilty and "sorry for" their partner who is contrite and apologetic (see Kubany, 1999, pp. 146-148). Beck et al. (1979) discuss the case of a man who was in this type of conflict—and experienced guilt; the man had to decide whether to buy a new car, which would make his job easier, or to spend the money on his family (pp. 187-188).

In summary, from the perspective of the multidimensional model, double approach-avoidance conflicts are a source of distress and foster the perception that involved individuals will consider themselves to have played a causal role in the creation of distress. As such, double approach-avoidance conflicts are expected to be highly reliable contexts for guilt.

### *Inequitable Benefits or Penalties*

Baumeister et al. (1994) assert that inequities are an important source of guilt and cite evidence that people experience guilt when they have benefited more or suffered less than others. The multidimensional model predicts that—given close proximity—inequitable distribution of benefits or penalties will promote guilt. Perceptions that one has benefited unfairly at someone else's expense or that someone else has suffered unfairly may stimulate cognitions that it was "wrong" to have

benefited unjustly and that one "should do something" to undo the inequity. Survival guilt—guilt about surviving when others did not—is a common symptom among trauma survivors (American Psychiatric Association, 1994, p. 425; Kubany, Abueg, et al., 1997) and represents an extreme instance of guilt about inequities. In many traumatic events, such as wars or disasters (e.g., the Oklahoma City bombing), negative outcomes are arbitrary, and survivors—in close proximity with victims who did not survive—often struggle with the fact that tragic outcomes could just as easily have befallen them. Perceptions that someone else received a fate that he or she "didn't deserve" may promote beliefs among innocent survivors that they should have suffered a similar fate.

Even diffuse survivor guilt can sometimes be traced back to specific things that survivors believe they should have done differently. For example, in a recent TV documentary of the Normandy invasion, an American World War II veteran expressed that he should not have survived the invasion. Later in the program, the veteran disclosed guilt for having cowered in fear under the bodies of dead American comrades during the beach invasion.

### *Blame from Others*

Blame from others may act upon an individual in two ways to produce or increase the potential for guilt. Explicit and implicit verbal blame [e.g., "It's your own fault . . . You should have (acted differently)"] are likely to evoke negative affect (e.g., Kubany, Bauer, Pangilinan, Muraoka, & Enriquez, 1995; Kubany, Richard, & Bauer, 1992). Blame can also plant "seeds of doubt" and increase the probability that blamed individuals—whether innocent or not—will believe they played some role in the outcome [e.g., "What were you doing out at 3 o'clock in the morning? Were you asking to get raped!? . . . Why didn't you just leave (an abusive intimate partner)"]. If blamed individuals are already in partial agreement with the accuser's point of view, guilt may be exacerbated (see Renner, Wackett, & Ganderton, 1988). There is clinical evidence that many incest survivors and battered women internalize blame attributed to them by their perpetrators, and Renner et al. (1988) found that self-blame by victims of sexual assault was positively and significantly correlated with blame from others.

### *Omnipresence of Guilt-Promoting Contextual Factors During Traumatic Events and During Guilt-Evoking Events of Everyday Life*

As stated earlier, the eight contextual factors posited to contribute to guilt are prominent in traumatic events. First, traumatic events often cause severe damage. Second, *by definition* people exposed to traumatic events are in close proximity to the infliction of harm (American Psychiatric Association, 1994, p. 427). Third, whereas many traumatic events, such as earthquakes are "acts of God," many other traumatic events are caused by people (e.g., serious auto accidents, violent crime, technological disasters). Fourth, with respect to proximity, trauma survivors are either victims themselves, witness others being traumatized, or are close-relationship-partners of victims. Fifth, traumatic

events often produce outcomes considered irreparable. Sixth, trauma survivors often confront choices which are all considered unacceptable in some respect. Seventh, many traumatic events do not inflict an equal amount of damage on everyone involved, and the differential impact is often arbitrary or random. Finally, trauma victims are often blamed for their own misfortune (McCaul, Veltum, Boyechko, & Crawford, 1990; Renner et al., 1988).

Importantly, all the contextual contributors to guilt—except irreparability—are also manifested during commonplace guilt-evoking events (e.g., see Klass, 1987). First, most common guilt-evoking events produce damage or harm, often in the form of hurt feelings, disappointment, or some other form of emotional pain. Second, most common guilt-evoking events occur in the context of social transactions in which there is close proximity (e.g., someone's feelings being hurt in a conversation). Third, virtually all common guilt-evoking events are caused by people and are certainly not considered acts of God. Fourth, individuals who are harmed in common guilt-evoking events are often close-relationship-partners (e.g., friends, family) of the agents in these events (Baumeister et al., 1994). Fifth, social contexts in which someone will "suffer" no matter what the person chooses to do are frequent contexts for commonplace guilt. Sixth, the harm to "victims" in common guilt-evoking events is often arbitrary, and like trauma survivors, such victims do not deserve to suffer. Finally, agents in common guilt-evoking situations are often blamed by the injured party or somebody else (e.g., a child may be scolded for "being selfish" or making his sister cry).

In conclusion, the ubiquitous presence of contextual factors that contribute to guilt during traumatic and common guilt-evoking events underscores the potential importance of incorporating extrapersonal or contextual factors in models of guilt that purport to be broadly explanatory and predictive.

### *Potential Investigations of the Effects of Contextual Factors*

Definitive statements about the importance of the contextual factors as contributors to guilt awaits controlled empirical study. The contextual factors lend themselves to empirical investigation in at least two ways. First, researchers can examine the occurrence of guilt (after the fact) in naturally occurring events which produce variations in (a) proximity to damage, (b) degree of damage, (c) closeness of the relationship with those harmed; (d) reparability of the outcome; (e) extent to which damage is human caused, (f) availability of good and bad choices, (g) equitability of benefits or penalties, and (h) blame from others for causing the damage. Second, each of these factors can be manipulated as independent variables in analogue experiments in psychology laboratories (e.g., Kubany, Watson, et al., 2001). The outcomes of such research will determine the degree to which theorizing about the importance of extrapersonal forces as contributors to guilt needs to be refined or modified.



### The Role of Guilt Proneness as a Contributor to Guilt in the Context of Negative Events

In the multidimensional model, situational or contextual factors are thought to exert a stronger causal influence on the occurrence and magnitude of guilt than are individual differences in guilt proneness or tendencies to experience guilt.<sup>7</sup> Kubany, Watson, et al. (2001) recently obtained some initial evidence for this proposition in a series of analogue studies with college students. In two of the studies, participants imagined themselves involved in two types of scenarios: (a) a series of common guilt-evoking situations and (b) several traumatic situations with tragic endings. Participants also completed two popular measures of guilt proneness—the Personal Feelings Questionnaire (Harder & Lewis, 1986) and the Guilt Inventory (Kugler & Jones, 1992). Even the least guilt-prone participants rated the trauma scenarios as much more strongly guilt-evoking than the scenarios of common guilt-evoking events. In other words, the environmental stressors to which participants were exposed were a better predictor of the magnitudes of participants' guilt than were individual differences in guilt proneness. Kubany, Watson, et al. (2001) concluded that, "knowing the details of stressful events may be more useful information for predicting guilt magnitude than is knowledge about the personalities or value systems of the individuals involved" (p. 15).

### Shame and Its Relationship with Guilt

It may be important to differentiate guilt from shame, an emotional experience closely associated with guilt and elicited by the same kinds of events or situations as guilt (Harder, 1995; Johnson et al., 1987; Tangney & Fischer, 1995). In spite of a large amount of empirical research on shame and the relationship between shame and guilt, authorities have not agreed on the fundamental meaning of shame or on how shame and guilt can be readily differentiated (Buss, 1980; Emde & Oppenheim, 1995; Harder, 1995; Lindsay-Hartz et al., 1995; Tangney et al., 1995). Wallbott and Scherer (1995) concluded that in spite of all the research on this topic, the differentiation between

<sup>7</sup>We have chosen to use the terms "guilt proneness" and "tendencies to experience guilt" rather than the commonly used term "dispositional guilt," a term often used to describe individual differences in the tendency to experience guilt across common guilt-evoking situations (e.g., unintentionally hurting someone's feelings or standing up a friend for lunch; e.g., Klass, 1987). Many individuals (trauma survivors in particular) are prone to experience recurrent and frequent guilt about specific events from the, often distant, past (e.g., Kubany et al., 1996; see Kubany, 1997b) and may or may not experience frequent guilt in response to commonplace situations that often evoke guilt. Hence, the terms guilt proneness and tendencies to experience guilt refer to tendencies to experience recurrent guilt about specific past events *and/or* across everyday situations. Differential tendencies to experience guilt about events from the distant past versus guilt across situations has been overlooked in much of the guilt measurement/assessment literature (e.g., Harder & Lewis, 1986; Klass, 1987; Kugler & Jones, 1992; Tangney et al., 1992).

shame and guilt "remains fuzzy" (p. 466). Part of the problem here stems from the unavailability of a precise phenomenological definition of shame. Shame theorists have *characterized* shame in lengthy discourses and contrasted shame and guilt along various dimensions (e.g., Barrett, 1995; Lewis, 1971; Nathanson, 1987; Tangney, 1995). However, shame theorists have generally failed to provide precise or succinct operational *definitions* of shame that would allow one to know authoritatively or with certainty when shame is and is not being experienced and when a person is experiencing shame as opposed to guilt (or *visa versa*) at any particular point in time.

Most shame theorists are in agreement that the most important or "essential definitional distinction" between shame and guilt is that shame involves depreciation of the entire self whereas guilt involves depreciation of specific actions or behaviors (e.g., Barrett, 1995; Ferguson & Stegge, 1995; Harder, 1995, p. 381; Tangney, 1997; Wallbott & Scherer, 1995). For example, Lewis (1971) stated that

(t)he experience of shame is directly about the self, which is the focus of evaluation. In guilt, the self is not the central object of negative evaluation, but rather the thing done is the focus. In guilt, the self is negatively evaluated in connection with something but it is not itself the focus of the experience. (p. 30)

Similarly, Tangney (1997) stated that with shame the individual places an emphasis on a "bad self," whereas with guilt the emphasis is on a "bad behavior" (p. 742). Put still another way, shame is conceptualized as a negative emotional experience associated with beliefs that there is "something wrong with me" whereas guilt is a negative emotion associated with beliefs that there is "something wrong with what I did."<sup>8</sup>

As a therapist specializing in posttraumatic stress disorder (PTSD), EK has worked with more than 200 trauma survivors (e.g., Kubany, 1997b; Kubany & Manke, 1995; Kubany & Watson, 2001), many of whom experienced shame as well as guilt (e.g., Dutton, 1992; Hogland & Nicholas, 1995). This work has afforded repeated opportunities to observe directly how shame and guilt are manifested phenomenologically as emotional *states*. The phenomenology of guilt, which has already been

<sup>8</sup>Several authors have observed that the experience of shame is often associated with tendencies to hide, shrink, feel small, or disappear and with concerns about being publicly "exposed" or "feeling naked" (e.g., Barrett, 1995; Ernde & Oppenheim, 1995; Tangney, 1998). Statements reflecting these tendencies are often made in the context of self-deprecating remarks. For example, one client said she felt "exposed . . . as a bad person" by disclosing that it "felt good" when she was molested by her father as a 4-year old child. Another client said, "Telling you what I did makes me feel like crawling up into a little ball." However, it is not necessary or essential for cognitions reflecting "action readiness" tendencies (Frijda & Mesquita, 1994)—such as impulses to hide or to avoid public exposure—to be present for shame to be experienced, just as it is not essential for impulses to make amends to be present for guilt to be experienced. From a learning theory perspective (e.g., Staats, 1975), the experience of shame (e.g., "I feel worthless") may act as a *discriminative stimulus* that exerts directive control over operant-response impulses (i.e., action readiness tendencies) to hide or "escape" (e.g., "I feel like crawling away and disappearing").

Table 1

Three Guilt-Cognition Factors of the Trauma-Related Guilt Inventory  
and Items that Load on Each of These Factors<sup>a</sup>

Factor 1: Hindsight-Bias Linked Responsibility
1. I was responsible for causing what happened
2. I hold myself responsible for what happened
3. I blame myself for what happened
4. I could have prevented what happened
5. I should have known better
6. I blame myself for something I did, thought, or felt
7. I knew better than to do what I did
Factor 3: Wrongdoing—Violation of personal standards
1. I had some thoughts or beliefs that I should not have had
2. I had some feelings that I should not have had
3. I did something that went against my values
4. What I did was inconsistent with my beliefs
5. I should have had certain feelings that I did not have
Factor 4: Lack of Justification <sup>b</sup>
1. I had good reasons for doing what I did
2. What I did made sense
3. If I knew today—only what I knew when the event occurred—I would do exactly the same thing
4. What I did was completely justified

<sup>a</sup> Factor 2, labeled Distress, is not presented.

<sup>b</sup> All four Lack of Justification items are reverse scored.

discussed, involves the occurrence of unpleasant feelings plus beliefs about one's role or behavior in a negative event. (Table 1 presents the items which comprise the three guilt-cognition factors on the Trauma-Related Guilt Inventory, Kubany et al., 1996).

Based on reviews of the shame literature and clinical observations, we propose a definition of shame that clearly delineates the phenomenological occurrence of shame and allows one to differentiate the occurrence of shame from the occurrence of guilt. Shame is defined *phenomenologically* as an *unpleasant feeling plus a global negative self evaluation—often (although not always) expressed as an "I feel . . ." statement*. With respect to the manifestation of shame, individuals can devalue themselves globally in a wide variety of linguistic ways. EK has routinely recorded clients' expressions of shame during therapy sessions, and Table 2 presents some of the various ways clients have verbally communicated the experience of shame. (Of course, it is recognized that such expressions can also be manifested in thinking or as covert self-talk.)

The assertion that shame is often expressed as an "I feel . . ." statement and as a negative characterization of one's entire self is also supported by the way shame is operationalized on two popular measures of shame—the Personal Feelings Questionnaire (PFQ) shame scale (Harder & Lewis, 1986) and the shame proneness scale of the Test of Self-Conscious Affect (TOSCA; Tangney et al., 1992). Eight of nine items

Table 2

Examples of Expressions of Shame		
I feel like I'm a nobody	I'm feeling no self worth	There's something wrong with me
I feel so dirty and ugly	I'm ashamed of my whole life	I feel so badly about myself
I'm tainted	I feel dirty all the time	I was so stupid...an idiot
I'm damaged goods	I felt like a toy...an object	I feel like an inadequate mother
I'm an emotional mess	I feel scarred for life	I feel like a dysfunctional person
I feel like a fake person	I hate myself	I feel like a worthless piece of shit
I feel less of a person	I feel flawed as a person	I feel like an 80-year old man
I feel like a child	It makes me feel cheap	I feel dirty and ashamed just telling you
I feel like a failure	I feel unqualified	I feel mortified and humiliated
I feel selfish	I feel like an outcast	I don't deserve (to be happy, etc.)
I feel incompetent	I'm a bad person	He made me feel like a slut...a whore
I'm such a fool	I have these ugly feelings	I'm not worthy of anyone's love
I feel dispensable	I feel like I'm always wrong	I feel so beaten down...defeated
I'm not lovable	I'm a hypocrite	I'm not good enough
I feel like a bag lady	I feel like a tramp	I feel like a horrible person
I feel like a total loser	I feel like a has been	I'm an unworthy piece of shit
I don't feel normal	I'm disgusted with myself	I'm a wimp...pathetic
It makes me feel like she	I'm terrible! (because the	I feel like a piece of trash that should
deserves someone better	incest) felt good	be thrown away
I feel like all the names my	I feel like a soggy piece of	No man will ever stay with someone
Father called me	cereal that somebody spit out	like me
It made me feel like I'm	My self-esteem has been	I have an overwhelming sense of
nothing...air	ripped away	being inferior to other people

on the shame scale of the PFQ assess the experience of shame in terms of a "feeling" statement (e.g., "feeling 'stupid' . . . feeling disgusting to others"). The TOSCA format calls for respondents to rate the degree to which each of 15 scenarios is likely to evoke a response characterized as an expression of shame. For example, one scenario states, "At work, you wait until the last minute to plan a project, and it turns out badly." Using a 5-point scale, respondents rate the degree to which this scenario would be likely to evoke the following reaction: "You would *feel* incompetent" (emphasis added). Of 15 shame responses listed on the TOSCA, 10 are belittling of oneself, and 9 are expressed as "I feel . . ." statements (e.g., "You would feel immature . . . You would feel stupid").

The operational definition of the phenomenological experience of shame provided above takes into account the necessity that the experience of shame requires the occurrence of negative affect. When a person globally devalues himself or herself using an "I feel . . ." statement, the phrase "I feel" is presumptive evidence that the person is experiencing unpleasant feelings or negative affect as the value judgment is expressed. In addition, self-depreciative expressions—with or without an "I feel" phrase attached—are presumptive evidence in and of themselves that negative affect is being experienced as the negative value judgment is expressed (in thought or speech). In lower order and higher order language conditioning, evaluative or emotionally charged words and phrases (as conditioned stimuli) have been shown to elicit emotional responses (e.g., Staats, 1968; Staats, Staats, & Crawford, 1962).

Some theorists believe that guilt and shame can both be experienced at the same time (e.g., Bybee & Quiles, 1998; Tangney et al., 1992). For example, Tangney et al. (1992) refer to guilt portrayed in the clinical literature as "guilt fused with shame" (p. 476). (Also see Tangney et al., 1995, pp. 357-358.) From the present perspective, different emotions are often experienced in close *contiguity* with one another but are not ordinarily experienced *simultaneously*. When describing their reactions to negative experiences, individuals may switch rapidly from guilt to shame, making it *appear* that both emotions are being experienced simultaneously. The expression of negative affectivity may be continuous but an analysis of the words people assign to their affective states may show that guilt and shame are typically experienced sequentially. Lindsay-Hartz et al. (1995) provide a nice illustration of a woman describing her reactions to a negative event, in which the woman first expresses guilt and then expresses shame (as guilt and shame are defined in this article):

I felt guilty when my mother died . . . I felt it was all my fault. Like if I have paid more attention to her and helped her...I started thinking over and over of all the things I could have done . . . I should have been more open. [There were] things I could have done. I should have tried harder (*all expressions of guilt*) . . . I feel like a monster, and that I'm evil . . . an evil person (*expressions of shame*) (p. 227) (parenthetical phrases added).

Similarly, during therapy sessions with trauma survivors, clients are often observed "flip flopping" back and forth between emotions. For example, the statements below were spoken in anguish by a Japanese woman who experienced guilt and shame for getting involved in an abusive intimate relationship during which time she had three unwanted abortions (at the insistence of her boyfriend).

I should have listened to my parents (guilt). I never should have moved in with him (guilt). How stupid! (shame). All the warning signs were there, and I just ignored them (guilt). And why didn't I leave after the first abortion? I feel dirty and ashamed just telling you about this (shame).<sup>9</sup>

There is an additional important reason why it often appears that guilt and shame are experienced simultaneously. Although guilt and shame may not, by definition, be experienced simultaneously, the *beliefs* that underlie guilt and shame *can* be maintained simultaneously. That is, guilt-related cognitions or ideas (e.g., "I should have known better") and shame-related ideas (e.g., "There's something wrong with me") can certainly be believed

<sup>9</sup>In paraphrasing the views of Tangney et al. (1995), Harder (1995) stated that if a person feels so terrible about doing (or not doing) something that he or she feels globally bad and/or does not attempt to (or cannot) make amends, then the person is suffering predominantly from shame, not guilt. While we do not concur with Tangney et al.'s contention that this type of situation reflects guilt "fused" with shame, the description is consistent with the proposition that guilt about tragic outcomes can lead or give rise to shame.

simultaneously. However, guilt or shame will not be activated as emotions unless the latent guilt- or shame-related beliefs are retrieved into consciousness with accompanying negative affect. Both guilt and shame are affective experiences, and the expression of guilt-related beliefs or shame-related beliefs, alone, in the absence of affect, is not an emotion.

The distinction between shame-related beliefs and proneness to experience shame may help to account for the strong relationship between shame and negative self-esteem (e.g.,  $r = .74$  in a study by Wong & Cook, 1992). Self-esteem or self-concept is usually thought of as a cognitive construct (e.g., James, 1890; Rogers, 1961; Rosenberg, 1965), and self-esteem has been operationalized in terms of evaluative beliefs about the entire self that are relatively stable and pervasive and cut across situational contexts (e.g., Rosenberg, 1965). For example, one item on the Rosenberg Self-Esteem Scale (Rosenberg, 1965) asks respondents to rate their degree of endorsement of the statement, "At times I think I am no good at all." Presumably, at those times that individuals think they are "no good at all," they will also experience negative affect and the *state* experience of shame.

Many trauma survivors experience both guilt and shame (e.g., Dutton, 1992; Hogland & Nicholas, 1995; Lisak, 1994). Kubany, Watson, et al. (2001) suggested that guilt and shame tend to be yoked in trauma because when survivors implicate themselves as playing a significant role in tragic, irreparable outcomes, they are also prone to conclude that "the outcomes reflect on their entire selves, personality, or character" (p. 28) [e.g., a woman concluded that she was "evil" and a "monster" because she believed there were things she "could have done" to prevent her mother's death from cancer (Lindsay-Hartz et al., 1995, p. 277)].<sup>10</sup> As another example, Kubany, Watson, et al. (2001) cite the example of an acquaintance rape survivor who concluded that there was "something wrong with me" for not preventing the assault in light of the fact that she, herself, was a sex abuse counselor and "should have seen the signs." Kubany, Watson et al. also cited the case of a Vietnam combat veteran who underwent successful cognitive therapy for war-related guilt (Kubany, 1997b). Even though therapy focused exclusively on the veteran's highly specific *actions* in Vietnam—resulting in a sharp drop in the magnitude of guilt-related beliefs—the veteran's ratings of himself changed from "I'm a very bad person for what I did" before therapy to "I am not a bad person for what I did" after therapy. Thus, it is hypothesized that guilt and shame are often yoked in the experience of trauma survivors

<sup>10</sup>Janoff-Bulman (1985) might consider these statements to be examples of "behavioral self-blame" and "characterological self-blame"—which, according to Tangney et al. (1992), bear "some resemblance" to guilt and shame. Tangney and colleagues might also consider this a situation in which guilt has become "fused with shame" and is, therefore, primarily shame—by definition. In paraphrasing the views of Tangney et al. (1995), Harder (1995) stated that

if a person feels so terrible about doing (or not doing) something that he or she feels globally bad and/or does not attempt to (or cannot) make amends, then the person is suffering predominantly from shame, not guilt.

From our point of view, this quotation reflects both guilt and shame and is consistent with our proposition that guilt about tragic outcomes can lead or give rise to shame.

because distress and high-magnitude guilt cognitions can sometimes contribute causally to shame cognitions and shame.

### Thinking Errors That Contribute to Guilt

Guilt which has little or no rational basis has received scant attention from researchers in personality-social and developmental psychology (e.g., Baumeister et al., 1994; Bybee, 1995; Tangney & Fischer, 1995). So called "irrational" or inappropriate guilt is common among individuals who suffer from depression (e.g., American Psychiatric Association, 1994, p. 327; Beck et al., 1979) and is particularly common among trauma survivors. For example, several investigators have noted that trauma survivors often distort or exaggerate the importance of their roles in traumatic events and experience guilt or self-blame that has no rational basis<sup>11</sup> (Jehu, 1989; Kubany, 1994; Kubany & Manke, 1995; Miller & Porter, 1983; Price, 1990; Resick & Schnicke, 1993). In EK's clinical work with trauma survivors, he has repeatedly observed clients manifest certain kinds of thinking errors or faulty logic that lead them to draw faulty conclusions about their roles in traumatic events (Kubany, 1997a, 1997b; Kubany & Manke, 1995). Such conclusions are associated with distortions in guilt cognitions (e.g., exaggerations in perceptions of personal responsibility) that result in magnification of guilt. Fifteen thinking errors identified by Kubany and Manke (1995) are presented in Table 3. Correcting these thinking errors is the primary task of Cognitive Therapy for Trauma-Related Guilt, a semi-structured, highly psychoeducational intervention aimed at alleviating event-related guilt (e.g., Kubany, 1998; Kubany & Manke, 1995).

The potential importance of thinking errors to guilt theory is that the thinking errors may help explain why many trauma survivors and individuals who suffer from depression experience guilt which has no rational basis or is disproportionate to these individuals' contribution to some negative outcome. The validity of the posited relationship between the thinking errors and guilt will be supported to the extent that correcting clients' thinking errors results in reliable reductions in guilt (e.g., see Kubany, Hill, et al., 2001).

<sup>11</sup>Kubany (1998) noted that research on the role of cognition in trauma has been studied under a diversity of labels, the majority of which relate to the experience of guilt. These labels have included:

"appraisals," "internal . . . attributions" (e.g., Andrews & Brewin, 1990), "maladaptive beliefs" (e.g., Resick & Schnicke, 1993), explanations "why" the trauma occurred (e.g., Frazier & Schauben, 1994), narrative "trauma themes" (Newman, Riggs, & Roth, 1997), "self-blame" (e.g., Miller & Porter, 1982), "behavioral and characterological" self-blame (e.g., Janoff-Bulman, 1985), "assimilation" (Resick & Schnicke, 1993), "cognitive schemata" (Dutton et al., 1994), "pathogenic schemas" (Smucker & Niederee, 1995), and "errors of logic" and "faulty conclusions" (Kubany & Manke, 1995). (Kubany, 1998, p. 124)

Table 3

Thinking Errors that Lead to Faulty Conclusions and Contribute to "Irrational" Guilt<sup>a</sup>

Thinking error that contributes to Faulty Conclusion #1 (faulty beliefs about preoutcome knowledge)

1. Hindsight-biased thinking

Thinking errors that contribute to Faulty Conclusion #2 (responsibility distortion)

1. Hindsight-biased thinking
2. Obliviousness to totality of forces that cause traumatic events
3. Equating a belief that one could have done something to prevent the traumatic event with a belief that one caused the event
4. Confusion between responsibility as accountability (e.g., "my job") and responsibility as having the power to cause or control outcomes

Thinking errors that contribute to Faulty Conclusion #3 (justification distortion)

1. Weighing the merits of actions taken against idealized actions which did not exist
2. Weighing the merits of actions taken against options that only came to mind later
3. Focusing only on "good" things that might have happened had an alternative action been taken
4. Tendency to overlook "benefits" associated with actions taken
5. Failure to compare available options in terms of their perceived probabilities of success before outcomes were known
6. Failure to realize that (a) acting on speculative hunches rarely pays off and (b) occurrence of a low probability event is not evidence that one should have "bet" on this outcome before it occurred
7. Failure to recognize that different decision-making "rules" apply when time is precious than in situations which allow extended contemplation of options

Thinking errors that contribute to Faulty Conclusion #4 (wrongdoing distortion)

1. Tendency to conclude wrongdoing on the basis of outcome rather than on the basis of one's intentions before the outcome was known
2. Failure to realize that strong emotional reactions are not under voluntary control (i.e., not a matter of choice or willpower)
3. Failure to recognize that when all available options have negative outcomes, the least bad choice is a highly moral choice

Thinking error that contributes to all of the faulty conclusions

1. Belief that an emotional reaction to a cognition or idea provides evidence for the idea's validity

<sup>a</sup>Adapted slightly from Kubany and Manke (1995)

## Predicted Causal Relationships in the Multidimensional Model

Figure 1 depicts a causal model that accounts for the degree to which a person will experience guilt in response to a negative event. A negative event that affects an individual is the setting event that potentiates the occurrence of guilt. Genetic/physiological factors (X1), such as conditionability and physiological reactivity, have weak effects on guilt proneness (X2) and distress (X6). Prior learning factors (X3) such as traumatic experiences, religious teachings, and guilt-inducing child-rearing practices can have causal effects on proneness to experience guilt (X2) and hindsight-biased thinking (X5). Proneness to experience guilt has moderate effects on the magnitude of distress and guilt cognitions (X7). Acquiring knowledge of the outcome (X4) activates the



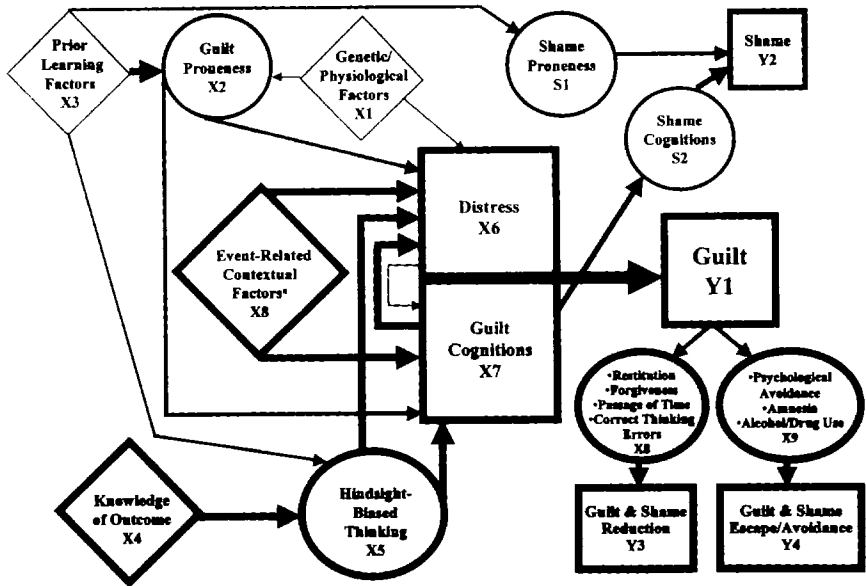


Figure 1. A causal model that accounts for guilt given the occurrence of a negative event.

*Note.* The width and direction of the arrows indicate the hypothesized strength and direction of relationships. Modifiable causal variables are presented as circles. Unmodifiable causal variables are presented as diamonds. The width of the circle boundaries indicate the hypothesized degree of modifiability. The width of the squares indicate the importance of the primary dependent variables.

\*Contextual factors include (a) proximity to a negative event, (b) amount of damage or harm, (c) harm to a close relationship partner, (d) reversibility/irreversibility of harm, (e) human-caused negative events versus acts of God, (f) situations where all options have negative consequences, (g) arbitrary or inequitable harm, and (h) blame from others.

<sup>b</sup>Guilt cognitions include beliefs about (a) preventability (b) personal responsibility, (c) wrongdoing, and (d) lack of justification.

potential for hindsight-biased thinking, which can exert a strong causal effect on distress and the guilt cognitions (also see Figure 2). Unmodifiable situational and social contexts in which negative events occur (X8) can also have direct and powerful causal effects on the strengths of distress and the guilt cognitions.

Distress (X6) and at least one kind of guilt cognition (X7) must both be present for guilt (Y1) to occur. Distress about the event affects the guilt cognitions directly only insofar as (a) distress evokes or activates guilt cognitions via mood-state-dependent retrieval (e.g., Bower, 1981; Bower & Cohen, 1982) or (b) a search for the explanation or meaning of distress leads to self attributions (e.g., "Why do I feel this way?") (see Frazier & Schauben, 1994). The effect of distress on the guilt cognitions is represented by the thin unidirectional arrow from distress to guilt cognitions. Potentially modifiable guilt cognitions (Kubany & Manke, 1995) can have very strong effects on the strength of distress (hence, the

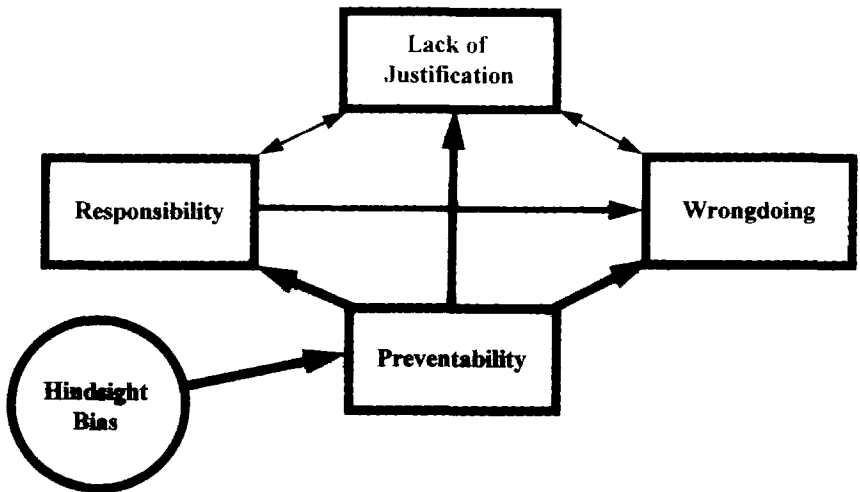


Figure 2. Hypothesized causal relationships between the four guilt cognitions.

thick arrow leading from guilt cognitions to distress). In the multidimensional model, event-related contextual factors are *much stronger* predictors of guilt (distress plus guilt-related beliefs) than are personal values or personality characteristics, such as guilt proneness (see X2 in Figure 1).

Proneness to experience shame (S1) is not expected to contribute to guilt, but guilt and shame are correlated phenomena because increases in distress and guilt cognitions (e.g., "I should have left him sooner") heighten the probability of shame cognitions (S2) (e.g., "I'm a coward") and the emotional experience of shame (Y2)—particularly when negative outcomes are severe, as in trauma.

The hypothesized causal relationships between the four guilt cognitions are depicted in Figure 2. Beliefs that one possessed preoutcome knowledge about the foreseeability and "preventability" of a negative event (shown as preventability beliefs) can have direct and powerful effects on the strengths of the other three guilt cognitions. Beliefs about responsibility can have direct causal effects on the strength of wrongdoing (i.e., a person's belief that he or she caused a negative outcome can lead a person to conclude that he or she thereby violated his or her personal beliefs; Kubany & Manke, 1995). The model hypothesizes bi-directional causal relationships between lack of justification and responsibility and between lack of justification and wrongdoing. For example, a person's belief that he or she violated his or her values may heighten the person's perception that he or she wasn't justified in acting as he or she did. Likewise, beliefs that one's actions were not fully justified may exacerbate the person's perception of wrongdoing.

## Methods for Reducing and Avoiding Guilt<sup>12</sup>

### *Methods for Reducing or Eliminating Guilt*

The multidimensional model predicts that guilt (with respect to specific events) may be reduced or eliminated by any action or method that reduces the magnitude of guilt cognitions or permanently diminishes distress about a guilt-evoking event. We have identified four such methods: (a) making amends or restitution, (b) forgiving oneself or being forgiven, (c) passage of time (as more fully explained below), and (d) correcting thinking errors that contribute to guilt. Making amends or restitution includes apologies and engaging in reparative actions that mitigate harm or compensate the injured party. Such actions may provide relief from distress and may give rise to positive-affect-evoking cognitions that counteract the negative affect elicited by guilt cognitions (e.g., "I apologized . . . I made it up to her"). In addition, making amends or restitution often results in being forgiven by the injured party who may stop blaming or "let go" of anger directed at the transgressor. Asking for forgiveness from one's God or higher power through confession or prayer may also result in relief from distress. Such relief may be associated with a sense of "confessional" atonement or perceived release from eternal damnation. Similarly, forgiving oneself may result in a removal of distress-evoking self-recriminations. Mild commonplace guilt may often dissipate with the passage of time, even without an apology or reparative action. Guilt is thought to dissipate under such circumstances because distress related to the guilt-evoking event may diminish with the passage of time. Ordinarily, neither the agent nor the injured party remain upset for long when the harm incurred is relatively slight and transitory and the incident loses its salience or significance. Severe guilt perceived as irreparable is not expected to diminish with time, however, because harshly negative guilt and shame cognitions continually recharge the memory of the guilt-evoking event with negative valence by means of higher-order language conditioning (e.g., Kubany & Watson, 2001; Staats, 1975, 1996).

Correcting thinking errors that contribute to guilt is the fourth primary way that guilt may be reduced or alleviated. Although it is possible for some people to correct such thinking errors on their own, for example by reading self-help books (e.g., Matsakis, 1992, 1999), a professional cognitive therapy intervention is usually necessary to teach individuals how to correct their thinking errors when irrational guilt is chronic and severe (e.g., Beck et al., 1979; Kubany, 1997b).

### *Methods for Escaping and Avoiding Guilt (Which Remains Latent and Subject to Reactivation)*

Although guilt may generate impulses to attempt reparative action, such impulses are not always acted upon. Instead, individuals may consciously "try not to think about" incidents that evoke guilt. To the extent

<sup>12</sup>This section is the least developed and researched part of the proposed model of guilt and is considered tentative.

that such efforts are successful, the experience of guilt may be avoided; however, the guilt will be subject to reactivation if or when the individual is reminded of the event. In cases of severe chronic guilt—related to events which are largely irreparable or irreversible—emotional relief may be sought by active avoidance “strategies” that keep guilt-related memories out of conscious awareness. For example, memories of trauma are often associated with guilt (e.g., Kubany, 1997b; Resick & Schnicke, 1993) and efforts to avoid thinking about the trauma and to avoid activities that serve as trauma reminders are hallmark symptoms of PTSD (American Psychiatric Association, 1994, p. 428). Dissociative amnesia, another symptom of PTSD, may serve as an unconscious coping mechanism for avoiding the direct experience of guilt (and shame) (e.g., Irwin, 1998). For instance, a recent client, whose guilt-ridden memories of childhood sexual abuse surfaced when she was assaulted by her husband, said “I hate thinking about it.” She also expressed regret for having “recovered” the memory until a therapeutic guilt intervention resulted in guilt alleviation (“I don’t feel guilty anymore. It’s just sad that it happened”).

Alcohol and drug abuse, which are common problems among individuals with PTSD (e.g., Deykin & Buka, 1997; Ouimette, Wolfe, & Chrestman, 1996), can also serve to avoid, “numb,” or mask emotional pain associated with guilt-related recollections. For instance, several combat veterans with histories of substance abuse have told EK during therapy that war-related guilt did not emerge as an issue until they stopped “using” and entered drug rehabilitation.

A summary of the ways guilt can be escaped, avoided, and eliminated are shown as X8 and X9 in Figure 1.

### “Perpetrator” Guilt or Lack Thereof

The primary purpose of the multidimensional model is to account for guilt (or lack thereof) in the vast majority of the population—namely, individuals who are well socialized, generally law abiding, and who experience “empathic distress” when involved in events that cause harm or emotional pain to other people. However, for any guilt theory to be relatively comprehensive, it must also account for guilt, or lack thereof, among socially deviant individuals who intentionally commit acts of interpersonal violence, such as physical or sexual abuse or assault. Such individuals are hereafter referred to as *perpetrators* and include murderers, rapists, child molesters, and individuals who abuse or batter their intimate partners.

To understand perpetrator guilt, it will be important to specify what factors contribute to or inhibit perpetrator guilt, and why such guilt may not serve as a regulatory mechanism for inhibiting subsequent acts of perpetration. Based on a review of the psychological literature on rapists, child molesters, and wife batterers (e.g., Marshall & Serran, 2000), we have identified three factors that may contribute to a lack of guilt and repeat offenses among perpetrators: (a) generalized empathy deficits, (b)

emotional states that reciprocally inhibit empathy in the situational contexts which precede violent acts, and (c) beliefs which justify violence and foster victim blame.

As noted earlier, guilt is an affective experience, and if a person does not experience negative affect related to his or her role in a negative event, guilt will not occur. In other words, if a person harms or violates the rights of another person, but experiences no unpleasant feelings or empathy toward the injured party, the person will not experience guilt. As such, psychopaths or individuals with antisocial personality disorder, who are known to exhibit pervasive empathy deficits, may rarely or never experience guilt. Such individuals "frequently lack empathy and tend to be callous, cynical, and contemptuous of the feelings, rights, and sufferings of others" (American Psychiatric Association, 1994, p. 647).<sup>13</sup>

Whether or not perpetrators experience constant empathy deficits, many perpetrators do not experience empathy during their violent acts or in their mood states that precede these acts (see Pithers, 1999). For example, there is considerable evidence that empathy deficits exist among sexual abusers, at least during the commission of their offenses (e.g., Chaplin et al., 1995). For example, Scully (1988) found that 50% of 47 rapists were unable to even remotely perceive their victims' emotional states, and describing their own feelings for their victims during the assaults, the most common reply was that they "had no feelings at all" (p. 209). In other words, they felt nothing emotionally within themselves and nothing for their victims' agony. Scully concluded that "the empathy feelings . . . were so weak or nonexistent to be unreliable mechanisms for self-control" (p. 209).

Many rapists and child molesters not only do not feel bad when reflecting upon, contemplating, or committing sexual crimes; at such times, they may instead become sexually aroused—thereby reciprocally inhibiting empathy or any possibility of guilt. For example, evidence from phallometric assessment of sexual arousal indicates that deficient levels of empathy are associated with disordered sexual arousal in both child abusers and rapists (Chaplin et al., 1995; Rice, Chaplin, Harris, & Coutts, 1994). Chaplin and colleagues found that magnitude of deviant arousal was inversely related to sex offenders' levels of empathy.

There is ample evidence that anger is a frequent precursor of violence—marital violence in particular—and from the present point of view, anger cognitions and anger are incompatible with or reciprocally inhibit guilt cognitions and guilt. There is also some evidence, consistent with mood-dependent retrieval theory (e.g., Bower, 1981; Bower & Cohen, 1982), that anger, in perpetrators, controls deviant cognitions. Eckhardt, Barbour, and

<sup>13</sup>It is widely held that emotional deficits, which are a central feature of psychopathy, are due to "faulty wiring" (Porter, 1996, p. 181)—that psychopaths probably have some neurological (likely genetic) anomalies creating a predisposition to the disorder" (Porter, 1996, p. 181). However, Porter (1996) proposed an alternative pathway in which environmental factors are considered critical. Porter argues that individuals who are severely traumatized and disillusioned by loved ones may over time "turn off" their emotions to cope, and he makes a case for "secondary psychopathy" as a distinct dissociative disorder.

Davison (1998) found that scenarios—in which maritally violent and maritally nonviolent men imagined themselves overhearing their wife flirt with another man or negatively evaluate them and express uncertainty about the marriage—reliably increased state anger and resulted in more irrational thoughts and hostile attributions. Similarly, Holtzworth-Monroe and Hutchinson (1993) found that violent husbands were more likely than nonviolent husbands to attribute negative intentions, selfish motivation, and blame to their wife in response to scenarios in which the wife was nonresponsive during sex or talking and laughing with an attractive man.

Recognition that empathy deficits contribute to repeat offenses and recidivism by perpetrators is acknowledged by the widespread advocacy of empathy training programs for incarcerated felons (e.g., Marshall et al., 1995). One goal of such programs may be to instill remorse about wrongful acts from the past. However, the primary goal of empathy training is for felons to experience empathy toward potential *future* victims (and “anticipatory” guilt), so as to inhibit antisocial impulses and deter recidivism.

In addition to lacking empathy for the plight of their victims, perpetrators are also more likely than nonviolent men to blame victims or deny personal responsibility for violence and are more likely to possess attitudes which justify or are supportive of violence as acceptable behavior. Chaplin et al. (1995) found that child molesters are more likely than men who do not have deviant sexual preferences to endorse justification for and attitudes supportive of sex with children. Violent husbands are more likely than nonviolent husbands to have positive attitudes toward violence and are more likely to endorse the use of marital violence (Saunders, Lynch, Grayson, & Linz, 1987). For example, many batterers can identify circumstances in which they believe it is acceptable to use violence toward their wives (Cadsky & Crawford, 1988; Shields, McCall, & Hanneke, 1988).

Most of the propositions regarding perpetrator guilt set forth in this article are based on theory and indirect evidence. Interestingly, none of the studies cited directly assessed guilt with standardized measures of guilt. Studies which directly examine guilt among perpetrator subtypes may represent a fertile line of investigation that may enhance the scientific understanding of guilt.

### Evidence for the Multidimensional Model

Thus far, results from three multistudy projects and a treatment-outcome study in which alleviation of guilt was a central aim provide some support for the validity of the multidimensional model. (Kubany, Abueg, et al., 1995; Kubany et al., 1996; Kubany, Hill, et al., 2001; Kubany, Watson, et al., 2001).

#### *Initial Examination of the Multidimensional Model: Applications to Vietnam Veterans and Battered Women*

Kubany, Abueg, et al. (1995) tested some basic tenets of the multidimensional model in separate studies with battered women and Vietnam combat veterans. Participants rated their reactions to and the magnitude of their perceived roles in trauma-related events that evoked guilt. Among

Vietnam veterans, distress ratings were highly correlated with indices of event-related guilt severity. Among both survivor groups, beliefs about preventability, justification, responsibility, and wrongdoing were each significantly correlated with the strength of guilt. In multiple regression analyses, distress plus cognitions accounted for 61% of the variance in veterans' guilt and 44% of the variance in battered women's guilt.

#### *Development and Validation of the Trauma-Related Guilt Inventory*

In a 7-study project to develop and validate the Trauma-Related Guilt Inventory, Kubany et al. (1996) obtained evidence which supports the conceptualization of guilt as a multidimensional construct with affective and cognitive dimensions. Three factor-analytic studies produced a final questionnaire with a clear and stable factor structure consisting of an affective factor labeled Distress and three cognitive factors labeled Hindsight Bias/Responsibility, Wrongdoing, and Lack of Justification. In studies with five samples of trauma survivors (including college students, battered women, and combat veterans), scores on a Guilt Cognitions Scale contributed between 15% and 35% of variance in scores on a Global Guilt Scale in addition to variance accounted for by a Distress Scale.

#### *An Analogue Investigation of Various Tenets of the Multidimensional Model*

Kubany, Watson, et al. (2001) conducted a series of analogue studies with college students to evaluate various aspects of the convergent and discriminant validity of the multidimensional model. In each of four studies, participants read scenarios of six tragic events in which they were to imagine themselves involved (as innocent witnesses). The magnitude of the five guilt-component variables (e.g., causal responsibility) was assessed in three of the studies, and in each of these studies guilt-component ratings were positively and significantly correlated with guilt ratings. Across the three studies, the guilt-component variables in combination accounted for between 57% and 75% of the variance in guilt. As initial support for discriminant validity, guilt-cognition variables were weakly and nonsignificantly correlated with anger directed at someone else and were more strongly correlated with guilt than with self-pity.

In two of the studies, participants were given information intended to activate hindsight bias. After their initial ratings of each scenario, participants were told how the outcome might have been prevented (had this knowledge been possessed prior to the outcomes), and participants then rated their reactions to the scenarios a second time. Participants' re-ratings of distress, the guilt-cognitions, and guilt were all significantly higher than their initial ratings on these variables. The findings are consistent with the hypothesis that hindsight-biased preventability beliefs mediate guilt by having direct causal effects on the magnitudes of distress and perceptions of responsibility, justification, and wrongdoing.

In two of the studies, participants rated their reactions to the trauma scenarios *and* to scenarios of common guilt-evoking situations. As predicted, the trauma scenarios elicited much stronger distress and guilt ratings than did the commonplace scenarios. However, participants' guilt-component ratings in response to the common guilt-evoking scenarios were all strongly positively

correlated with their ratings of commonplace guilt, and commonplace guilt-component ratings in combination accounted for 70% of the variance in commonplace guilt. These findings suggest that the structure of trauma guilt and commonplace guilt is similar and that the multidimensional model may account for commonplace guilt as well as trauma guilt.

In a fifth study, 125 participants were asked to identify which of the six trauma scenarios evoked the "most" and the "least" guilt and to give their reasons in writing. In an analysis of participants' "most guilt" reasons, hindsight bias was implicated in 51% of participants' responses. For example, 38% participants' "most guilt" explanations used the phrases "should have" or "could have" (e.g., "I should have seen the warning signs . . . I should have heard the desperation in my friend's voice"). In addition, almost one third of participants communicated explicit or implicit *absence* of hindsight-biased thinking as reasons for their "least guilt" choices (e.g., "I did not see any signs of physical abuse and had no idea it occurred"). These findings are consistent with the conceptualization of guilt as an unpleasant feeling with associated beliefs that one should have thought felt or acted differently (e.g., Kubany, Abeug, et al., 1995).

#### *Efficacy of Cognitive Trauma Therapy for Battered Women with PTSD (CTT-BW) for Alleviating Trauma-Related Guilt and Reducing Guilt Proneness*

Indirect support for the multidimensional model comes from results of a treatment outcome study of Cognitive Trauma Therapy for Formerly Battered Women with PTSD (CTT-BW), a multi-component, cognitive-behavioral intervention derived from psychological learning principles (Hill, Kubany, & Owens, 1998; Kubany, Hill, et al., 2001; Kubany & Watson, 2002). A central treatment component of CTT-BW is Cognitive Therapy for Trauma-Related Guilt, which, as discussed earlier, focuses on correcting thinking errors (e.g., hindsight-biased thinking) thought to contribute causally to guilt-related beliefs and to guilt. To the extent that guilt is reduced by modifying beliefs posited as causing guilt, the multidimensional causal model of guilt receives some support. Of 32 women who completed CTT-BW with EK, there were 80% mean reductions in the magnitudes of guilt cognitions and in global trauma-related guilt<sup>14</sup> (Kubany, Hill, et al., 2001). In addition, there were 75%

<sup>14</sup>There are 22 items on the Guilt Cognitions Scale of the Trauma-Related Guilt Inventory. Sixteen of the cognitions assessed on this scale are shown in Table 1. The cognitions are assessed using a 5-point response format, with anchors from *not at all true* = 0 to *extremely true* = 4. Prior to therapy, the 32 participants' mean score on the Guilt Cognitions Scale was 2.1. After therapy, participants' mean score was 0.4—which is midway between *not at all true* and *slightly true*. Hence, the intervention resulted in the virtual eradication of participants' guilt-related beliefs and also their global trauma-related guilt. (Participants' mean score on the Global Guilt Scale after therapy was 0.5).

Along with reductions in the magnitudes of guilt cognitions, there were corresponding decreases in depression (from  $M = 28.8$  before therapy to  $M = 4.6$  after therapy on the Beck Depression Inventory) and corresponding 90% increases in self-esteem. Moreover, PTSD remitted as a diagnosis in 94% of the women ( $n = 30$ ) (Kubany, Hill, et al., 2001). Although it is beyond the scope of this paper to elucidate on the relationship between guilt and psychopathology, the above findings are consistent with the hypothesis that guilt-related beliefs are causal in the maintenance of PTSD and depression (Kubany & Watson, accepted for publication).



mean reductions in guilt proneness and shame proneness [as measured by the Personal Feelings Questionnaire (PFQ; Harder & Lewis, 1986)]—findings consistent with the proposition that the same cognitive factors or guilt cognitions that contribute to trauma guilt contribute to shame and also contribute to everyday guilt.<sup>15</sup>

### Concluding Remarks

In this article we have primarily addressed aspects of the multidimensional model having to do with the structure of guilt, factors that causally contribute to the experience and magnitude of guilt (trauma guilt in particular), and how understanding trauma guilt may help broaden our understanding of commonplace guilt. We did not discuss the social functions of guilt, the circumstances under which guilt is and is not adaptive, the extent to which severe guilt is related to other psychopathology, and whether or to what extent chronic guilt should be considered an “appropriate” reaction<sup>16</sup> (which could be topics for an entire article). Also, in its present form the multidimensional model emphasizes guilt about prior or past events, and no attempt was made to explain or examine the functions of “anticipatory” guilt that emerges when individuals contemplate some future transgression. It is our intention to address each of these issues in subsequent explications and empirical investigations of the multidimensional model.

It is important to note that the conceptualization of guilt delineated in this paper is relatively complex, and several of the variables posited as contributing to guilt are highly correlated. It is possible that these variables, while making sense, could be assessed statistically in a less redundant manner. That is, might the overall model be simplified to include only variables that contribute unique variance in the prediction of guilt. This is an empirical question that may be worthy of further investigation.

The multidimensional model has several features that may enhance its ability to promote an increased scientific understanding of guilt. First, all aspects of the model are consistent with the phenomenological definition of guilt as an unpleasant feeling with accompanying beliefs that one should have thought, felt, or acted differently. Second, the multidimensional model breaks away from theoretical models that consider guilt to be generated by intrapsychic processes without consideration of situational or contextual parameters (see Baumeister et al., 1994). The multidimensional model may contribute to an increased ability to predict when and in what magnitude guilt will occur by its specification of contextual factors that contribute to guilt aside from consideration of individual difference variables. Third, exposition of the

<sup>15</sup>After therapy, the 32 participants' mean score on the three guilt items of the PFQ was 0.44, where a score of “0” means that you never experience the feeling and a score of “1” means you experience the feeling rarely. After therapy, participants' mean score on the four shame items of the PFQ was 0.52.

<sup>16</sup>See Kubany (1998) for an analysis of the issues raised by the question whether chronic guilt is ever an “appropriate” reaction and improper to treat (pp. 155-157).

multidimensional model represents the first attempt to systematically account for the occurrence of severe chronic guilt (often thought to be "pathological") as well as guilt that is mild and transitory. Chronic guilt and mild, transitory guilt may both be explicable in terms of the same set of intrapersonal and extrapersonal factors. Fourth, the multidimensional model accounts in explanatory detail for "inappropriate" guilt that has no rational basis (e.g., Kubany & Manke, 1995). Until now, irrational guilt has received only passing attention from guilt researchers (e.g., Lindsay-Hartz et al., 1995; Zahn-Waxler & Robinson, 1995). Fifth, the multidimensional model serves as the conceptual basis for a cognitive-behavioral intervention aimed at alleviating guilt (e.g., Kubany & Manke, 1995). Historically, chronic guilt has proven difficult to treat or modify (e.g., Gerrard & Hyer, 1994; Johnson et al., 1996), and investigations aimed at understanding mechanisms that underlie guilt reduction in psychotherapy may lead to advances in the scientific understanding of guilt. Finally, the multidimensional model generates a plethora of testable predictions. Only by having models of guilt that lend themselves to empirical disconfirmation as well as confirmation can researchers expect to advance a scientific understanding of guilt.

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